AIDS Action Baltimore, Inc (AAB) is a non-profit, tax-exempt corporation under Section 501 (c)(3) of the Internal Revenue Code. AAB is governed by a twelve member Board of Directors which is elected annually.

AAB is dedicated to the support and education of people with HIV and the prevention of HIV. AAB provides educational, financial, and emotional support for people with HIV and HIV prevention services in the Baltimore metropolitan area. AAB provides peer counseling and a support services referral line. We maintain an HIV financial assistance program that provides financial assistance for housing, utilities and medical bills.

AAB also administers Project TEA Time and No Wrong Door, HIV prevention programs for transgender people that promotes HIV testing and helps people get linked to care and treatment and remain in treatment.

AAB has recently begun advocating for research, treatment and support services for people with hepatitis C virus (HCV). Many people are co-infected with both HIV and HCV. We also advocate for more efficient and more effective treatment services and research programs for people with HIV and HCV as well as fair pricing for newly approved drugs and limited price increases for HIV and HCV drugs.

AAB advocates for more effective treatment and research programs for HIV and HCV. AAB representatives work directly with officials of the Food and Drug Administration (FDA), and the National Institutes of Health (NIH), including NIAID’s AIDS Clinical Trials Group (ACTG), the Johns Hopkins University AIDS Service, the Maryland State Infectious Disease and Environmental Health Administration, and all leading HIV and HCV pharmaceutical companies in conjunction with many national community organizations.

AAB also provides research and treatment information on our web site to assist people with HIV and HCV and their families, advocates and care providers with essential information on the latest in research and treatment news. (www.aidsactionbaltimore.org)

AAB provides all these services with two full time and two part-time employees, and our committed volunteers. AAB’s administrative expenses for 2013 totaled only 4.9% of total revenues.

PATIENT SERVICES
INDIVIDUAL HIV/AIDS ASSISTANCE PROGRAMS

AAB manages an HIV Emergency Financial Assistance Fund which provides immediate assistance to people with HIV who are experiencing a financial crisis as a result of HIV infection. Money is provided for housing and utilities, medical care or other non-reimbursable medical services.

Patients may apply to AAB personally or by referral. The application process is simple and easy, designed to be tailored to individual needs and individual circumstances. Applications are normally acted upon and the funds provided within days of submission.
HIV/AIDS SERVICES ORGANIZATIONS ASSISTANCE PROGRAM

Over the years, we have provided funding for the emergency assistance to patients, hospitals and community based organizations serving the Baltimore HIV/AIDS community. AAB has contributed over $75,000 to Johns Hopkins Hospital HIV Patient Emergency Fund (B. Frank Polk Fund). AAB has provided emergency assistance funding to the University of Maryland Hospital, contributing over $22,000 for Pediatric and Adolescent HIV/AIDS patient service programs.

AAB has also provided seed money and emergency assistance over the years to organizations such as Chase-Breton Health Services, Inc., Moveable Feast, Sisters Together and Reaching and AIDS Interfaith Residential Services.

410-837-AIDS HELPLINE

AAB provides a Peer Counseling Program for people at all stages of HIV infection. This program is particularly useful for people who have recently tested positive for HIV or are newly diagnosed with AIDS who need basic information on available services and direction on how to tackle the maze of government entitlement programs. Sometimes the only support necessary is a friendly ear and some guidance. For those times, peer counseling is a phone call away. For a referral on virtually any HIV related problem, referral or concern, the AAB Helpline is available - Monday through Friday from 9 am to 5 pm.

DROP-IN CENTER AND AIDS LIBRARY

The AAB office on Eager Street in the Mount Vernon area of Baltimore City doubles as a convenient “Drop-In Center” for anyone interested in learning more about AAB’s programs and services or about HIV or HCV research and treatment.

AAB maintains HIV and HCV resource information on new treatment and research available at our office for those interested in taking a proactive role in their healthcare.

AAB PUBLICATIONS

AAB has a unique publications program designed to provide essential information to people with HIV and HCV, their families, advocates and care providers.

The first and oldest of AAB’s publications is the AIDS Resource Guide, currently being updated for a tenth edition. This is the only complete and comprehensive online guide to vital services for every person affected by HIV in the metropolitan area. It lists virtually every HIV information resource, and service provider, as well as essential city and state HIV metropolitan area contact information.

Our Resource Guide provides a primer to help people understand their laboratory results. A glossary of terms common to HIV-related disease is also included.

AAB also provides online information from research conferences and national newsletters. Complex medical issues are covered by community experts and discussed in laymen’s terms. We provide a compilation of articles from the best community treatment writers across the country on topics such as new antiviral drugs, side effects, HIV and Aging, AIDS related cancers, neurological complications, Women and HIV as well as exciting new HIV “Cure” research and HCV treatment paradigm changing research information.

HIV COMMUNITY FORUMS

AAB conducts free community forums for people with HIV and HCV, their care givers and advocates in an effort to disseminate much needed treatment information from scientific conferences and meetings. We have conducted HIV forums since 1994. We have begun to
conduct our forums throughout the community in partnership with other local AIDS service organizations in a continuing effort to outreach to all affected communities.

CLINICAL RESEARCH ADVOCACY PROGRAM

Since its founding in 1987, AAB has been deeply involved in the conduct of clinical research in HIV. The ultimate cure for HIV and HCV will only be found through research. AAB works to make HIV and HCV research more compassionate, safe, relevant to clinical practice, and more broadly inclusive of all people with HIV and HCV.

AAB’s program has two goals:

The first is to expedite ethical drug development and make new drugs available to the people that need them the most as quickly and safely as possible. The second is to help educate the affected community in the latest medical and research information in an effort to empower people with HIV and HCV to discuss their medical care with their health providers.

To achieve our goals, AAB works with a variety of institutions, governmental agencies, and the pharmaceutical industry. AAB works with the Maryland State Infectious Disease and Environmental Health Administration (IDEH), formerly known as the AIDS Administration, the Baltimore City Health Department, the FDA, the National Institutes of Health (NIH), and a variety of national research advocacy groups. AAB President, Lynda Dee, has been a member of the NIH’s Office of AIDS Research Clinical Trials Review Panel and the NIH’s AIDS Clinical Trial Group Executive Committee and Community Constituency Group.

Ms. Dee has also been a member of the Executive Committee of the Forum for Collaborative HIV Research, which brings together experts in cutting edge areas of HIV and HCV research. Ms. Dee was a member of the Community Liaison Sub-Committee for the 5th through the 9th Conferences on Retroviruses and Opportunistic Infections. She is a former Board member of New York’s Treatment Action Group, a prominent international AIDS treatment advocacy organization. She was one of the first Co-Chairs of the Drug Development Committee of the AIDS Treatment Activists Coalition, a national treatment activist organization. Ms. Dee continues to exert pressure on government and industry to study real life strategies for the use of new HIV and HCV drugs as well as their long-term side effects. She continues to advocate with Congress and drug companies to ensure drug safety as well as expedited and ethical development of new HIV and HCV drugs. She has been working on HCV research advocacy since 2008 in an effort to provide promising new drugs to the many people who are co-infected with HIV and HCV and is co-chair of the Maryland Hepatitis Coalition. Ms. Dee also serves locally on the Maryland AIDS Drug Assistance Program (ADAP) Advisory Board. ADAP provides lifesaving drugs to Maryland’s working poor.

TREATMENT SERVICES ADVOCACY PROGRAM

AAB has taken a leadership role in ensuring that the law in Maryland regarding HIV testing requirements was streamlined in order to remove HIV testing barriers for people who want to be tested. Ms. Dee was a member of the former AIDS Administration Working Group mandated by the Maryland legislature in this regard. This is vitally important as Baltimore City and Maryland rank tenth and ninth respectively in the US in AIDS cases in their respective geographic categories.

AAB is a leading member of the national Fair Pricing Coalition (FPC), working with the National Association of State AIDS Directors (NASTAD) and the AIDS Crisis Task Force (ACTF) to pressure “big pharma” to price new drugs reasonably and to limit drug price increases. The FPC and ACTF have forced drug companies to provide additional rebates to all national ADAP programs. The FPC has also pressured industry to initiate co-pay reimbursement programs for people with private insurance and free patient assistance
programs (PAPs) for people with no healthcare coverage. Every major HIV and HCV drug manufacturer has agreed to PAPs and co-pay reimbursement programs as a result of the efforts of Ms. Dee and her dedicated FPC colleagues.

AAB is also working with many national advocates to ensure that the newly enacted Affordable Care Act will not interfere with the care and support provided to people HIV through the Ryan White Care Act, a model program for HIV healthcare and support services. We need to ensure that we maintain currently covered HIV services and that the inclusion of all classes of antiviral drugs remain on new drug formularies.

BOARD OF DIRECTORS

Merle McCann, M.D. - Chairman
3704 N. Charles Street, #606
Baltimore, MD 21218

Michael Aquino
3424 Woodberry Avenue
Baltimore, MD 21211

Greg Baranoski
12 E. Mount Vernon Place, #103
Baltimore, MD 21202

Jake Boone
235 West Lafayette
Baltimore, MD 21217

Thomas Holden
3626 Yolando Road
Baltimore, MD 21218

Mark McMullen
3505 Newland Road
Baltimore, MD 21218

Ted Pearson
714 St. Paul Street
Baltimore, MD 21202

Ricki Rutley
1600 Park Avenue, 3rd Floor
Baltimore, MD 21217

William Smith
6600 Eberle Drive, #303
Baltimore, MD 21215

Cameron Wolf, Ph.D., M.P.H
8706 Granite Lane
Laurel, MD 20708

OFFICERS

Jeffrey Grabelle
President

Lynda Dee
Vice-President

Jake Boone
Secretary

Thomas Holden
Treasurer
2013 EVENTS

January
Nominations for Board of Directors
Brother Help Thyself Grant Award Ceremony
T.E.A. Time Meeting

February
Election of Board of Directors
Baltimore City Combined Charity Campaign Acceptance
T.E.A. Time Meeting

March
20th Conference on Retroviruses & Opportunistic Infections
MD State Combined Charity Campaign Acceptance
T.E.A. Time Meeting

April
MD Viral Hepatitis Summit
MD Hepatitis Coalition Meeting
National HIV/AIDS Strategy Meeting
HIV/HCV Co-Infection ADAP Summit

May
Central Regional Advisory Committee Meeting
T.E.A. Time Meeting
FDA Patient Network Annual Meeting
Direct Mail Drive

June
Gay Pride Parade
Gay Pride Celebration
Annual CARE Meeting
I.A.S. Conference on HIV Pathogenesis Treatment & Prevention
T.E.A. Time Annual Celebration

July
Town Forum: A Day of Action for People Living with HIV
T.E.A. Time Meeting
World Hepatitis Day

August
CAB Meeting
T.E.A. Time Meeting

September
Tea in the Valley Benefit
National Gay Men’s HIV/AIDS Awareness Day
Brother Help Thyself Grant Application Review
HIV-HCV CAB Meeting

October
Baltimore Black Pride Celebration
Maryland Hepatitis Coalition Meeting
TEA Time Meeting

November
Transgender Day of Remembrance
The Great Sweethearts Benefit Show
HCV Drug Development Advisory Group Meeting
Direct Mail Campaign
Thanksgiving Day Outreach

December
World AIDS Day Celebration of Life
12 Days Of Christmas Benefit at the Hippo
CIV Treatment Advocacy Panel Meeting
Christmas Outreach
INDEPENDENT AUDITOR’S REPORT

To The Board of Directors, AIDS Action Baltimore, Inc.

We have audited the accompanying statement of financial position of AIDS Action Baltimore, Inc. (a nonprofit organization) as of December 31, 2013 and 2012, and the related statements of activities, functional expenses and cash flows for the years then ended. These financial statements are the responsibility of the organization’s management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of AIDS Action Baltimore, Inc. as of December 31, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Friedman and Associates, P.A.,
Certified Public Accountants
Baltimore, Maryland July 11, 2014

The following financial information is excerpted from the Auditor’s Report. A complete copy of the Auditor’s Report and Accompanying Notes, and/or current financial statement is available upon request by contacting AIDS Action Baltimore, Inc. at 10 East Eager Street, Baltimore, MD 21202 or 410-837-2437. Documents and information submitted to the State of Maryland under the Maryland Charitable Solicitations Act are available from the Office of the Secretary of State, State House, Annapolis, MD 21401 for the cost of copying and postage.

AIDS ACTION BALTIMORE, INC.
Statement of Financial Position
as at December 31, 2013 and 2012

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and Cash Equivalents</td>
<td>$185,447</td>
<td>$158,640</td>
</tr>
<tr>
<td>Contributions Receivable</td>
<td>29,495</td>
<td>51,970</td>
</tr>
<tr>
<td>Prepaid Expenses</td>
<td>396</td>
<td>1,175</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT ASSETS</strong></td>
<td><strong>$215,338</strong></td>
<td><strong>$211,785</strong></td>
</tr>
<tr>
<td>Furniture &amp; Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Furniture and Equipment</td>
<td>$58,022</td>
<td>$58,650</td>
</tr>
<tr>
<td>Less: Accumulated Depreciation</td>
<td>48,922</td>
<td>55,617</td>
</tr>
<tr>
<td><strong>TOTAL FURNITURE &amp; EQUIPMENT</strong></td>
<td><strong>9,030</strong></td>
<td><strong>3,033</strong></td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>$224,368</strong></td>
<td><strong>$214,818</strong></td>
</tr>
</tbody>
</table>

| LIABILITIES & NET ASSETS | |
| **CURRENT LIABILITIES** | |
| Accrued Expense Payable | $3,149 | $3,100 |
| Income Taxes Payable | -0- | -0- |
| Credit Cards Payable | -0- | 2,215 |
Payroll Taxes Payable 5,066 4,941
TOTAL CURRENT LIABILITIES $ 8,215 $ 10,256

NET ASSETS
Unrestricted $214,903 $198,250
Temporarily Restricted 1,250 6,312
TOTAL NET ASSETS $216,153 $204,562
TOTAL LIABILITIES & NET ASSETS $224,368 $214,818

AIDS ACTION BALTIMORE, INC.
Statement of Activities
For The Years Ended December 31, 2013 and 2012

<table>
<thead>
<tr>
<th>Temporary Restricted</th>
<th>Unrestricted</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBLIC SUPPORT AND REVENUE:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PUBLIC SUPPORT:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td>$12,495</td>
<td>$140,970</td>
<td>$153,465</td>
</tr>
<tr>
<td>Special Events</td>
<td>-0-</td>
<td>87,558</td>
<td>87,558</td>
</tr>
<tr>
<td>Grants-Education</td>
<td>-0-</td>
<td>72,750</td>
<td>72,750</td>
</tr>
<tr>
<td>Grants-Ryan White</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>Total Public Support</td>
<td>$12,495</td>
<td>$301,278</td>
<td>$313,773</td>
</tr>
<tr>
<td>Net Assets Released from Restriction</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>REVENUE:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental Income</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>Investment Income</td>
<td>-0-</td>
<td>47</td>
<td>47</td>
</tr>
<tr>
<td>TOTAL SUPPORT AND REVENUE</td>
<td>$12,495</td>
<td>$301,325</td>
<td>$313,820</td>
</tr>
</tbody>
</table>

EXPENSES
Program Services:
Client Services 17,557 269,127 286,884 277,095
SUPPORTING SERVICES
Management and General -0- 15,545 15,545 17,450
TOTAL EXPENSES $17,557 $284,672 $302,229 $294,545
Change in Net Assets (5,062) 16,653 11,591 77,543
NET ASSETS - BEGINNING OF THE YEAR 6,312 198,250 204,562 127,019
NET ASSETS - END OF THE YEAR $1,250 $214,903 $216,153 $204,562
<table>
<thead>
<tr>
<th></th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations</td>
<td>5,000</td>
<td>0</td>
<td>28,000</td>
<td>0</td>
<td>26,000</td>
<td>2,500</td>
<td>25,000</td>
<td>0</td>
<td>7,500</td>
<td>0</td>
<td>5,000</td>
<td>25,000</td>
<td>26,000</td>
</tr>
<tr>
<td>Fund Raising</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Grants</td>
<td>16,000</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
<td>3,500</td>
</tr>
<tr>
<td>Special Events</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>21,000</td>
<td>3,500</td>
<td>28,500</td>
<td>3,500</td>
<td>28,500</td>
<td>38,500</td>
<td>28,500</td>
<td>3,500</td>
<td>14,000</td>
<td>38,500</td>
<td>88,500</td>
<td>53,500</td>
<td>350,000</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
<td>6,250</td>
</tr>
<tr>
<td>Bank Charges</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>30</td>
<td>0</td>
<td>20</td>
<td>0</td>
<td>30</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>20</td>
<td>0</td>
</tr>
<tr>
<td>Credit Card Fees</td>
<td>0</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>100</td>
</tr>
<tr>
<td>Dues and Subscription</td>
<td>0</td>
<td>250</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Fund Raising</td>
<td>0</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
<td>2,000</td>
</tr>
<tr>
<td>Utilities</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
<td>125</td>
</tr>
<tr>
<td>Insurance</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
<td>1,900</td>
</tr>
<tr>
<td>Office</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
<td>400</td>
</tr>
<tr>
<td>Payroll Taxes</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
</tr>
<tr>
<td>Pension</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
<td>800</td>
</tr>
<tr>
<td>Professional Fees</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
<td>775</td>
</tr>
<tr>
<td>Patient Services</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
<td>6,500</td>
</tr>
<tr>
<td>Public Education</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
<td>5,500</td>
</tr>
<tr>
<td>Rent</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
<td>1,175</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>24,775</td>
<td>30,525</td>
<td>30,375</td>
<td>30,905</td>
<td>30,775</td>
<td>27,395</td>
<td>27,375</td>
<td>28,825</td>
<td>27,375</td>
<td>30,775</td>
<td>25,565</td>
<td>26,075</td>
<td>340,760</td>
</tr>
<tr>
<td><strong>Excess of Revenue</strong></td>
<td>(3,775)</td>
<td>(27,025)</td>
<td>(1,875)</td>
<td>(27,405)</td>
<td>(2,275)</td>
<td>11,105</td>
<td>1,125</td>
<td>(25,305)</td>
<td>(13,375)</td>
<td>7,725</td>
<td>62,926</td>
<td>27,425</td>
<td>9,250</td>
</tr>
</tbody>
</table>